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UNITED STATES PATENT AND TRADEMARK OFFICE

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 Alexandria, Virginia 22313-1450
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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/821,326	04/09/2004	Robert M. Leach	11474.0NEW

26712
 HODGSON RUSS LLP
 ONE M & T PLAZA
 SUITE 2000
 BUFFALO, NY 14203-2391



CONFIRMATION NO. 9700
 FORMALITIES LETTER
 OC000000013061496
 OC000000013061496

Date Mailed: 06/24/2004

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted***Items Required To Avoid Abandonment:**

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

The application is informal since it does not comply with the regulations for the reason(s) indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Replacement drawings in compliance with 37 CFR 1.84 and 37 CFR 1.121 are required. The drawings submitted are not acceptable because:
 - The drawings submitted to the Office are not electronically reproducible. Drawing sheets must be submitted on paper, which is flexible, strong, white, smooth, non-shiny, and durable (see 37 CFR 1.84(e)). See Figure(s) all except 1a.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is **\$130** for a Large Entity

- **\$130** Late oath or declaration Surcharge.


08/26/2004 EFLORES 00000133 10821326

01 FC:1051

130.00 UP

Replies should be mailed to: Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

*A copy of this notice **MUST** be returned with the reply.*



Customer Service Center
Initial Patent Examination Division (703) 308-1202
PART 2 - COPY TO BE RETURNED WITH RESPONSE



I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on August 24, 2004

Susan L. Eick

Name

Susan L. Eick

Signature

August 24, 2004

Date of Signature

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Leach et al.

Serial No.: 10/821,326

Filed: April 9, 2004

For: Micronized Wood Preservative Formulations

RESPONSE

Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the Notice to File Missing Parts of Non-provisional Application mailed June 24, 2004 (copy enclosed), herewith is the executed Declaration and the \$130.00 filing fee.

Also enclosed herewith are replacement drawings in response to the aforementioned Notice to File Missing Parts.

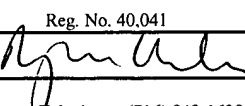
If any underpayment or overpayment has been made, please charge to Deposit Account No. 08-2442.

Respectfully submitted,

HODGSON RUSS LLP

By Ranjana Kadle
Ranjana Kadle, Reg. No. 40,041

One M&T Plaza, Suite 2000
Buffalo, New York 14203
Tel: (716) 848-1628
Dated: August 24, 2004
BFLODOCS: 953595 v1 (KFSR01!.DOC)

PTO/SB/174(10-03) Approved for use through 07/31/2006, OMB 0651-0032 FEE TRANSMITTAL for FY 2004 <i>Effective 10/01/2003. Patent Fees are subject to annual revision.</i> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.				Application Number		10/821,326																																																																																																																																																																																																																																														
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METHOD OF PAYMENT (check all that apply) <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None Deposit Account: Deposit Account Number: <u>08-2442</u> Deposit Account Name: <u>Hodgson Russ LLP</u> The Director is hereby authorized to (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any fee deficiencies or credit any overpayments <input type="checkbox"/> Charge any additional fees during pendency of this application. <input type="checkbox"/> Charge fees indicated below, except for the filing fee to the above-identified deposit account				FEE CALCULATION (continued)																																																																																																																																																																																																																																																
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